

Study ID#: \_\_\_\_\_

Date of Interview: /\_\_/\_/ /\_\_/\_/ /\_\_/\_/\_/\_/  
(Month) (Day) (Year)

Interviewer: \_\_\_\_\_

BREAST CANCER CORE QUESTIONNAIRE

INTERVIEWER-ADMINISTERED VERSION

OF THE

BREAST CANCER COMPREHENSIVE PROJECT

Prepared for the National Action Plan on Breast Cancer  
of the Office on Women's Health  
U.S. Department of Health and Human Services

by

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INTRODUCTION: During this interview, I'll ask you some questions about yourself, your family, and places where you have lived. Some questions may ask for sensitive information --- I want to remind you that all of your answers will be kept strictly confidential. The information you and others provide is very important to this study.

Q1. What is your date of birth?

/\_\_\_\_/\_\_\_\_/    /\_\_\_\_/\_\_\_\_/    /\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/  
 (MONTH)        (DAY)                                (YEAR)

Q2. What do you consider to be your race or ethnic group? If you belong to more than one group, please tell me all the groups you belong to. (SHOW CARD)

WHITE OR EUROPEAN-AMERICAN 01

BLACK, AFRICAN AMERICAN, OR AFRICAN ANCESTRY 02

LATINO/LATINA OR HISPANIC (NOT INCLUDING EUROPEAN  
SPANISH OR PORTUGUESE) 03

NATIVE AMERICAN, ALASKAN NATIVE, OR INDIGENOUS PEOPLE 04

ASIAN OR PACIFIC ISLANDER 05

Other (SPECIFY: \_\_\_\_\_) 06

Q3. What is the highest level of school you completed? (SHOW CARD)

|  |    |
|--|----|
| NO YEARS OF SCHOOL COMPLETED                             | 01 |
| NURSERY SCHOOL   | 02 |
| KINDERGARTEN   | 03 |
| 1ST, 2ND, 3RD OR 4TH GRADE                               | 04 |
| 5TH, 6TH, 7TH OR 8TH GRADE                               | 05 |
| 9TH GRADE  | 06 |
| 10TH GRADE   | 07 |
| 11TH GRADE   | 08 |
| 12TH GRADE, NO DIPLOMA                                   | 09 |
| GED  | 10 |
| HIGH SCHOOL GRADUATE (HIGH SCHOOL DIPLOMA)               | 11 |
| TECHNICAL SCHOOL GRADUATE                                | 12 |
| SOME COLLEGE BUT NO DEGREE                               | 13 |
| ASSOCIATE DEGREE IN COLLEGE - OCCUPATIONAL PROGRAM       | 14 |
| ASSOCIATE DEGREE IN COLLEGE - ACADEMIC PROGRAM           | 15 |
| BACHELOR'S DEGREE (E.G., BA, BS, BSN)                    | 16 |
| MASTER'S DEGREE (E.G., MA, MS, MENG, MED, MSW, MSN)      | 17 |
| PROFESSIONAL SCHOOL DEGREE (E.G., MD, DDS, DVM, LLB, JD) | 18 |
| DOCTORATE DEGREE (E.G., PHD, EDD)                        | 19 |
| OTHER (SPECIFY:_____)                                    | 20 |

Q4. What is your marital status? Are you currently:

- |                                 |   |
|---------------------------------|---|
| married,                        | 1 |
| living together with a partner, | 2 |
| widowed,                        | 3 |
| divorced,                       | 4 |
| separated, or                   | 5 |
| single and never married?       | 6 |

Q5. How often, if ever, do you participate in religious or spiritual activities, including prayer?

/\_\_\_\_/\_\_\_\_/  
# TIMES

- |           |    |
|-----------|----|
| PER DAY   | 1  |
| PER WEEK  | 2  |
| PER MONTH | 3  |
| PER YEAR  | 4  |
| NEVER     | 99 |

Q6. How often, if ever, do you attend religious or spiritual services at a church, synagogue, temple, or other religious or spiritual meeting place?

/\_\_\_\_/\_\_\_\_/  
# TIMES

- |           |    |
|-----------|----|
| PER DAY   | 1  |
| PER WEEK  | 2  |
| PER MONTH | 3  |
| PER YEAR  | 4  |
| NEVER     | 99 |

Q7. Have you ever been a full-time homemaker or housewife?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q11) |

Q8. How old were you when you started being a full-time homemaker?

/\_\_\_\_/\_\_\_\_/  
AGE

Q9. Are you still a full-time homemaker?

|     |         |
|-----|---------|
| YES | 1 (Q11) |
| NO  | 5       |

Q10. How old were you when you stopped being a full-time homemaker?

/\_\_\_\_/\_\_\_\_/  
AGE

Q11a. What was the longest paying job that you have held since you were 13 until (REFERENCE DATE)?

---

(JOB)

Q11b. What was the month and year when you started working at this job?

|             |                       |
|-------------|-----------------------|
| /____/____/ | /____/____/____/____/ |
| (MONTH)     | (YEAR)                |

Q11c. What was the month and year when you stopped working at this job?

|             |                       |
|-------------|-----------------------|
| /____/____/ | /____/____/____/____/ |
| (MONTH)     | (YEAR)                |

CURRENT 95

Q12. What were your activities and duties on that job?

---

(ACTIVITIES AND DUTIES)

Q13. What materials and chemicals did you use on that job?

---

(MATERIALS AND CHEMICALS)

NONE...99

Q14. Which term best describes the organization where you work(s/ed) at this job? Would you say it (is/was) a:

- |   |   |
|---|---|
| business,                                 | 1 |
| industry                                  | 2 |
| government,                               | 3 |
| educational institution,                  | 4 |
| non-profit or charitable organization, or | 5 |
| something else? OTHER (SPECIFY)           | 6 |
- 

PROBE: What (does/did) the organization do? What products does it produce? What are its activities? What services does it provide?

Q15. Did you regularly work after midnight on that job? By regularly, I mean at least four days a month for one year or more.

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q16a. What was the **next** longest paying job that you have held?

---

(JOB)

Q16b. What was the month and year when you started working at this job?

|           |                   |
|-----------|-------------------|
| /___/___/ | /___/___/___/___/ |
| (MONTH)   | (YEAR)            |

Q16c. What was the month and year when you stopped working at this job?

|           |                   |
|-----------|-------------------|
| /___/___/ | /___/___/___/___/ |
| (MONTH)   | (YEAR)            |

CURRENT 95

Q17. What were your activities and duties on that job?

---

(ACTIVITIES AND DUTIES)

Q18. What materials and chemicals did you use on that job?

(MATERIALS AND CHEMICALS)

NONE...99

Q19. Which term best describes the organization where you work(s/ed) at this job? Would you say it (is/was) a:

- |   |   |
|---|---|
| business,                                 | 1 |
| industry                                  | 2 |
| government,                               | 3 |
| educational institution,                  | 4 |
| non-profit or charitable organization, or | 5 |
| something else? OTHER (SPECIFY)           | 6 |
- 

PROBE: What (does/did) the organization do? What products does it produce? What are its activities? What services does it provide?

Q20. Did you regularly work after midnight on that job? By regularly, I mean at least four days a month for one year or more.

- |     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q21. (IF NEITHER Q11a NOR Q16a IS THE R'S CURRENT JOB, ASK) What is your current job or jobs? Include full-time, part-time, temporary and weekend jobs, volunteering, homemaking, and paid or unpaid work around your home, community or family business.

---

(Current Job(s))

INTRODUCTION: The next several questions ask about your personal medical history. Let's start with questions about your menstrual cycle.

Q22. How old were you when you had your first (menstrual/monthly) period?

/\_\_\_\_/\_\_\_\_/  
AGE

NEVER HAD A PERIOD      99 (Q29)

INTRODUCTION: I'm going to ask about your menstrual periods during each decade of your life under three conditions: when you were **not** using birth control medications or hormones, or fertility drugs, and you were **not** pregnant or nursing. Think about how frequently you had your periods, that is, the number of days between the first day of one period and the first day of the next.

Q23. How old were you when your monthly periods became regular? That is, you could predict one week before your next monthly period would begin and you were not using birth control pill, shots, or implants like Norplant.

/\_\_\_/\_\_\_/  
AGE

NEVER BEEN REGULAR 99

| DECADE: | Q24. On average, how often did you have your menstrual period in your (DECADE)? Would you say:             | Q25. On average, when you had your period in your (DECADE), how many days did you have to use a pad, tampon or other protection? |
|---------|--|--|
| teens?  | at least every 24 days, 1<br>between 25-32 days, 2<br>between 33-40 days, or 3<br>after 41 or more days? 4 | /___/___/<br>(# PAD-PROTECT DAYS)  |
| 20s?    | at least every 24 days, 1<br>between 25-32 days, 2<br>between 33-40 days, or 3<br>after 41 or more days? 4 | /___/___/<br>(# PAD-PROTECT DAYS)  |
| 30s?    | at least every 24 days, 1<br>between 25-32 days, 2<br>between 33-40 days, or 3<br>after 41 or more days? 4 | /___/___/<br>(# PAD-PROTECT DAYS)  |
| 40s?    | at least every 24 days, 1<br>between 25-32 days, 2<br>between 33-40 days, or 3<br>after 41 or more days? 4 | /___/___/<br>(# PAD-PROTECT DAYS)  |

Q26. Do you still have your monthly periods?

YES 1 (Q27 THEN GO TO Q29)  
NO 5

Q27. What was the month and year when you had your last monthly period?

/\_\_\_/\_\_\_/ /\_\_\_/\_\_\_/



(MONTH) (YEAR)

Q28. Why did your monthly periods stop? Was it because of:

|                                    |   |
|------------------------------------|---|
| pregnancy or nursing,              | 1 |
| the change of life or menopause, 2 |   |
| surgery,                           | 3 |
| medicine,                          | 4 |
| radiation., or                     | 5 |
| another reason? (SPECIFY)_____     | 8 |

\_\_\_\_\_

INTRODUCTION: The next questions ask about your pregnancy history. This includes live births, stillbirths, miscarriages, abortions, and tubal, molar, and other ectopic pregnancies

Q29. On or before (REFERENCE DATE) were you ever pregnant?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q35) |

Q30. Before (REFERENCE DATE), how many times have you been pregnant? Be sure to count your current pregnancy if you were pregnant on (REFERENCE DATE), and include all pregnancies even if they did not result in a live birth.

/\_\_\_\_/\_\_\_\_/  
# TIMES

Q31. How old were you when you were pregnant (for the first time)?

/\_\_\_\_/\_\_\_\_/  
AGE

|     | Q32. What was the outcome of your (1st/ 2nd, etc.) pregnancy? (SHOW CARD)  | Q33. If Q32=1 or 2, Did you breast-feed (any of these/this) baby/ies? | Q34. How long did you breast-feed (each/this) baby? |
|-----|--|---|---|
| 1ST | LIVE SINGLE BIRTH<br>1<br>MULTIPLE BIRTH, $\geq 1$<br>ALIVE<br>2<br>MULTIPLE BIRTHS, 0<br>ALIVE<br>3<br>STILLBIRTH<br>4<br>MISCARRIAGE<br>5<br>INDUCED ABORTION 6<br>ECTOPIC OR TUBAL<br>7 | YES 1<br><br>NO 5(Q35)  | /___/___/<br>#<br>WEEKS 1<br>MONTHS 2               |
| 2ND | LIVE SINGLE BIRTH<br>1<br>MULTIPLE BIRTH, $\geq 1$<br>ALIVE<br>2<br>MULTIPLE BIRTHS, 0<br>ALIVE<br>3<br>STILLBIRTH<br>4<br>MISCARRIAGE<br>5<br>INDUCED ABORTION 6<br>ECTOPIC OR TUBAL<br>7 | YES 1<br><br>NO 5(Q35)  | /___/___/<br>#<br>WEEKS 1<br>MONTHS 2               |
| 3RD | LIVE SINGLE BIRTH<br>1<br>MULTIPLE BIRTH, $\geq 1$<br>ALIVE<br>2<br>MULTIPLE BIRTHS, 0<br>ALIVE<br>3<br>STILLBIRTH<br>4<br>MISCARRIAGE<br>5<br>INDUCED ABORTION 6<br>ECTOPIC OR TUBAL<br>7 | YES 1<br><br>NO 5(Q35)  | /___/___/<br>#<br>WEEKS 1<br>MONTHS 2               |

|     |   |                        |                                    |
|-----|---|------------------------|------------------------------------|
| 4TH | LIVE SINGLE BIRTH<br>1<br>MULTIPLE BIRTH, $\geq 1$<br>ALIVE<br>2<br>MULTIPLE BIRTHS, 0<br>ALIVE<br>3<br>STILLBIRTH<br>4<br>MISCARRIAGE<br>5<br>INDUCED ABORTION<br>ECTOPIC OR TUBAL<br>6<br>7 | YES 1<br><br>NO 5(Q35) | /__/_/<br>#<br>WEEKS 1<br>MONTHS 2 |
| 5TH | LIVE SINGLE BIRTH<br>1<br>MULTIPLE BIRTH, $\geq 1$<br>ALIVE<br>2<br>MULTIPLE BIRTHS, 0<br>ALIVE<br>3<br>STILLBIRTH<br>4<br>MISCARRIAGE<br>5<br>INDUCED ABORTION<br>ECTOPIC OR TUBAL<br>6<br>7 | YES 1<br><br>NO 5(Q35) | /__/_/<br>#<br>WEEKS 1<br>MONTHS 2 |
| 6TH | LIVE SINGLE BIRTH<br>1<br>MULTIPLE BIRTH, $\geq 1$<br>ALIVE<br>2<br>MULTIPLE BIRTHS, 0<br>ALIVE<br>3<br>STILLBIRTH<br>4<br>MISCARRIAGE<br>5<br>INDUCED ABORTION<br>ECTOPIC OR TUBAL<br>6<br>7 | YES 1<br><br>NO 5(Q35) | /__/_/<br>#<br>WEEKS 1<br>MONTHS 2 |

IF > 6 PREGNANCIES, USE CONTINUATION SHEET.

Q35. Were there periods of at least 12 months when you had heterosexual sexual intercourse regularly, without using birth control or after a tubal ligation or hysterectomy, and did not become pregnant?  
By regular, I mean 3 or more times a month.

YES 1  
NO 5

Q36. Have you ever used a birth control method for any reason, including the regulation of your periods?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q40) |

Q37. How old were you when you first took birth control pills?

/\_\_\_\_/\_\_\_\_/  
AGE

Q38. Are you still taking birth control pills?

|     |         |
|-----|---------|
| YES | 1 (Q40) |
| NO  | 5       |

Q39. How old were you when you stopped taking birth control pills?

/\_\_\_\_/\_\_\_\_/  
AGE

Q40. Have you ever taken or are you currently taking hormone replacement therapy?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q41. Has a doctor or other health care provider ever told you that you have breast cancer?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q42. Have any of your female blood relatives had breast cancer?

|     |                         |
|-----|-------------------------|
| YES | 1                       |
| NO  | 5 (INTRODUCTION TO Q44) |

Q43. What is their relationship to you? (CIRCLE ALL THAT APPLY)

|             |   |   |  |             |
|-------------|---|---|--|-------------|
| SISTER      | 1 | → | How many sisters had breast cancer?    | /____/____/ |
| HALF-SISTER | 2 | → | How many 1/2sisters had breast cancer? | /____       |

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

|                 |   |   |  |
|-----------------|---|---|--|
| MOTHER          | 3 |   |  |
| DAUGHTER        | 4 | → | How many daughters had breast cancer? /_____<br>_____<br>_____ |
| AUNT            | 5 | → | How many aunts had breast cancer? /____/____/                  |
| OTHER (SPECIFY) | 7 | → | How many (OTHERS) had breast cancer?/____/____/<br>_____       |

INTRODUCTION: I'm going to ask you questions about exercise and physical activity since you were in high school. We're interested only in exercise and activities that you've done on a regular basis. By regular, we mean exercise for **at least two hours a week for four months or more in one year**. This is exercise you do during leisure time and does not include activities you do at your job.

First I'll ask about strenuous exercise, also called vigorous, intense or aerobic exercise. These activities increase your heart rate and your breathing, and cause you to break out in a sweat. Examples include basketball, jump rope, running, jogging, swimming laps, bicycling on hills, aerobic dance and some types of exercise equipment. Then, I'll ask about moderate exercise. These activities involve prolonged, rhythmic movements but do not increase your heart rate or breathing as much as strenuous exercise. Examples are brisk walking, golf, volleyball, bicycling on level ground, softball, dancing and gardening.

Q44. Did you do **strenuous** exercise or sports at least **two hours a week** for four **months** or more in **one year** in high school?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q48) |

Q45. What types of strenuous exercise or sports did you do in high school?

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Q46. About how many hours per week did you participate in these strenuous activities in high school?

|                           |                           |                           |
|---------------------------|---------------------------|---------------------------|
| 1. /____/____/<br>#HRS/WK | 2. /____/____/<br>#HRS/WK | 3. /____/____/<br>#HRS/WK |
|---------------------------|---------------------------|---------------------------|

Q47. What was the average number of months per year that you participated in these strenuous activities in high school?

1. /\_\_\_/\_\_\_/      2. /\_\_\_/\_\_\_/      3. /\_\_\_/\_\_\_/  
#MONTHS/YR      #MONTHS/YR      #MONTHS/YR

Q48. Did you do **moderate** exercise or sports at least **two hours a week** for four **months** or more in **one year** in high school?

YES      1  
NO      5 (Q52)

Q49. What types of moderate exercise or sports did you do in high school?

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Q50. About how many hours per week did you participate in these moderate activities in high school?

1. /\_\_\_/\_\_\_/      2. /\_\_\_/\_\_\_/      3. /\_\_\_/\_\_\_/  
#HRS/WK      #HRS/WK      #HRS/WK

Q51. What was the average number of months per year that you participated in these moderate activities in high school?

1. /\_\_\_/\_\_\_/      2. /\_\_\_/\_\_\_/      3. /\_\_\_/\_\_\_/  
#MONTHS/YR      #MONTHS/YR      #MONTHS/YR

Q52. (Did you do/Have you done) **strenuous** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 18 and 24/since you were 18)?

YES      1  
NO      5 (Q56)

Q53. What types of strenuous exercise or sports (did you do/have you done) (between the ages of 18 and 24/since you were 18)?

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Q54. About how many hours per week (did you participate/have you participated) in these strenuous activities (between the ages of 18 and 24/since you were 18)?

1. /\_\_\_/\_\_\_/                      2. /\_\_\_/\_\_\_/                      3. /\_\_\_/\_\_\_/  
#HRS/WK                      #HRS/WK                      #HRS/WK

Q55. What was the average number of months per year that you (have) participated in these strenuous activities (between the ages of 18 and 24/since you were 18)?

1. /\_\_\_/\_\_\_/                      2. /\_\_\_/\_\_\_/                      3. /\_\_\_/\_\_\_/  
#MONTHS/YR                      #MONTHS/YR                      #MONTHS/YR

Q56. (Did you do/Have you done) **moderate** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 18 and 24/since you were 18)?

YES                      1  
NO                      5 (Q60)

Q57. What types of moderate exercise or sports (did you do/have you done) (between the ages of 18 and 24/since you were 18)?

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Q58. About how many hours per week (did you participate/have you participated) in these moderate activities (between the ages of 18 and 24/since you were 18)?

1. /\_\_\_/\_\_\_/                      2. /\_\_\_/\_\_\_/                      3. /\_\_\_/\_\_\_/  
#HRS/WK                      #HRS/WK                      #HRS/WK

Q59. What was the average number of months per year that you (have) participated in these moderate activities (between the ages of 18 and 24/since you were 18)?

1. /\_\_\_/\_\_\_/                      2. /\_\_\_/\_\_\_/                      3. /\_\_\_/\_\_\_/  
#MONTHS/YR                      #MONTHS/YR                      #MONTHS/YR

Q60. (Did you do/Have you done) **strenuous** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 25 and 34/since you were 25)?

YES                      1  
NO                      5 (Q64)

Q61. What types of strenuous exercise or sports (did you do/have you done) (between the ages of 25 and 34/since you were 25)?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Q62. About how many hours per week (did you participate/have your participated) in these strenuous activities (between the ages of 25 and 34/since you were 25)?

1. /\_\_\_/\_\_\_/  
#HRS/WK

2. /\_\_\_/\_\_\_/  
#HRS/WK

3. /\_\_\_/\_\_\_/  
#HRS/WK

Q63. What was the average number of months per year that you (have) participated in these strenuous activities (between the ages of 25 and 34/since you were 25)?

1. /\_\_\_/\_\_\_/  
#MONTHS/YR

2. /\_\_\_/\_\_\_/  
#MONTHS/YR

3. /\_\_\_/\_\_\_/  
#MONTHS/YR

Q64. (Did you do/Have you done) **moderate** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 25 and 34/since you were 25)?

YES  
NO

1  
5 (Q68)

Q65. What types of moderate exercise or sports (did you do/have you done) (between the ages of 25 and 34/since you were 25)?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Q66. About how many hours per week (did you participate/have your participated) in these moderate activities (between the ages of 25 and 34/since you were 25)?

1. /\_\_\_/\_\_\_/  
#HRS/WK

2. /\_\_\_/\_\_\_/  
#HRS/WK

3. /\_\_\_/\_\_\_/  
#HRS/WK

Q67. What was the average number of months per year that you (have) participated in these moderate activities (between the ages of 25 and 34/since you were 25)?

1. /\_\_\_/\_\_\_/  
#MONTHS/YR

2. /\_\_\_/\_\_\_/  
#MONTHS/YR

3. /\_\_\_/\_\_\_/  
#MONTHS/YR



Q68. (Did you do/Have you done) **strenuous** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 35 and 44/since you were 35)?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q72) |

Q69. What types of strenuous exercise or sports (did you do/have you done) (between the ages of 35 and 44/since you were 35)?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Q70. About how many hours per week (did you participate/have you participated) in these strenuous activities (between the ages of 35 and 44/since you were 35)?

|                         |                         |                         |
|-------------------------|-------------------------|-------------------------|
| 1. /___/___/<br>#HRS/WK | 2. /___/___/<br>#HRS/WK | 3. /___/___/<br>#HRS/WK |
|-------------------------|-------------------------|-------------------------|

Q71. What was the average number of months per year that you (have) participated in these strenuous activities (between the ages of 35 and 44/since you were 35)?

|                            |                            |                            |
|----------------------------|----------------------------|----------------------------|
| 1. /___/___/<br>#MONTHS/YR | 2. /___/___/<br>#MONTHS/YR | 3. /___/___/<br>#MONTHS/YR |
|----------------------------|----------------------------|----------------------------|

Q72. (Did you do/Have you done) **moderate** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 35 and 44/since you were 35)?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q76) |

Q73. What types of moderate exercise or sports (did you do/have you done) (between the ages of 35 and 44/since you were 35)?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Q74. About how many hours per week (did you participate/have you participated) in these moderate activities (between the ages of 35 and 44/since you were 35)?

|                         |                         |                         |
|-------------------------|-------------------------|-------------------------|
| 1. /___/___/<br>#HRS/WK | 2. /___/___/<br>#HRS/WK | 3. /___/___/<br>#HRS/WK |
|-------------------------|-------------------------|-------------------------|

Q75. What was the average number of months per year that you (have) participated in these moderate activities (between the ages of 35 and 44/since you were 35)?

1. /\_\_\_/\_\_\_/ 2. /\_\_\_/\_\_\_/ 3. /\_\_\_/\_\_\_/  
#MONTHS/YR #MONTHS/YR #MONTHS/YR

Q76. (Did you do/Have you done) **strenuous** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 45 and 54/since you were 55)?

YES 1  
NO 5 (Q80)

Q77. What types of strenuous exercise or sports (did you do/have you done) (between the ages of 45 and 54/since you were 45)?

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Q78. About how many hours per week (did you participate/have you participated) in these strenuous activities (between the ages of 45 and 54/since you were 45)?

1. /\_\_\_/\_\_\_/ 2. /\_\_\_/\_\_\_/ 3. /\_\_\_/\_\_\_/  
#HRS/WK #HRS/WK #HRS/WK

Q79. What was the average number of months per year that you (have) participated in these strenuous activities (between the ages of 45 and 54 since you were 45)?

1. /\_\_\_/\_\_\_/ 2. /\_\_\_/\_\_\_/ 3. /\_\_\_/\_\_\_/  
#MONTHS/YR #MONTHS/YR #MONTHS/YR

Q80. (Did you do/Have you done) **moderate** exercise or sports at least **two hours a week** for four **months** or more in **one year** (between the ages of 45 and 54/since you were 55)?

YES 1  
NO 5 (Q84)

Q81. What types of moderate exercise or sports (did you do/have you done) (between the ages of 45 and 54/since you were 45)?

1. \_\_\_\_\_  
2. \_\_\_\_\_

3. \_\_\_\_\_

Q82. About how many hours per week (did you participate/have you participated) in these moderate activities (between the ages of 45 and 54/since you were 45)?

1. /\_\_\_/\_\_\_/  
#HRS/WK

2. /\_\_\_/\_\_\_/  
#HRS/WK

3. /\_\_\_/\_\_\_/  
#HRS/WK

Q83. What was the average number of months per year that you (have) participated in these moderate activities (between the ages of 45 and 54 since you were 45)?

1. /\_\_\_/\_\_\_/  
#MONTHS/YR

2. /\_\_\_/\_\_\_/  
#MONTHS/YR

3. /\_\_\_/\_\_\_/  
#MONTHS/YR

Q84. IF RESPONDENT IS  $\geq 55$  YEARS OLD: Have you done **strenuous** exercise or sports at least **two hours a week** for four **months** or more in **one year** during the past three years?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q88) |

Q85. What types of strenuous exercise or sports have you done during the past three years?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Q86. About how many hours per week did you participate in these activities during the past three years?

1. /\_\_\_/\_\_\_/  
#HRS/WK

2. /\_\_\_/\_\_\_/  
#HRS/WK

3. /\_\_\_/\_\_\_/  
#HRS/WK

Q87. What was the average number of months per year that you participated in these activities during the past three years?

1. /\_\_\_/\_\_\_/  
#MONTHS/YR

2. /\_\_\_/\_\_\_/  
#MONTHS/YR

3. /\_\_\_/\_\_\_/  
#MONTHS/YR

Q88. IF RESPONDENT IS  $\geq 55$  YEARS OLD: Have you done **moderate** exercise or sports at least **two hours a week** for four **months** or more in **one year** during the past three years?

|     |         |
|-----|---------|
| YES | 1       |
| NO  | 5 (Q92) |

Q89. What types of moderate exercise or sports have you done during the past three years?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Q90. About how many hours per week did you participate in these activities during the past three years?

1. /\_\_\_/\_\_\_/  
#HRS/WK

2. /\_\_\_/\_\_\_/  
#HRS/WK

3. /\_\_\_/\_\_\_/  
#HRS/WK

Q91. What was the average number of months per year that you participated in these activities during the past three years?

1. /\_\_\_/\_\_\_/  
#MONTHS/YR

2. /\_\_\_/\_\_\_/  
#MONTHS/YR

3. /\_\_\_/\_\_\_/  
#MONTHS/YR

Q92. In the **past year**, on average, how many hours per day or week did you spend doing housework?

/\_\_\_/\_\_\_/  
#HRS

PER DAY                      1  
PER WEEK                    2

Q93. In the **past year**, on average, how many hours per day did you spend standing or walking?

/\_\_\_/\_\_\_/  
#HRS/DAY

Q94. In the **past year**, on average, how many hours per day or week did you spend at work?

/\_\_\_/\_\_\_/  
#HRS

PER DAY                      1  
PER WEEK                    2

Q95. In the **past year**, on average, how many hours per day or week did you spend doing physically demanding work on the job, such as carrying or digging?

/\_\_\_/\_\_\_/  
#HRS

PER DAY                      1

PER WEEK 2

The next few questions ask about use of tobacco products.

Q96. Have you smoked at least 100 cigarettes or cigars in your entire life?

YES 1  
NO 5 (Q98)

Q97. Do you currently smoke at least one cigarette or cigar a day or 7 cigarettes or cigars a week?

YES 1  
NO 5

Q98. Have you ever chewed tobacco?

YES 1  
NO 5 (INTRODUCTION TO Q100)

Q99. Do you currently chew tobacco?

YES 1  
NO 5

INTRODUCTION: Next, I'm going to ask questions about your typical diet since you were 13 years old. Think back to when you were 13 years old and answer these questions about the foods you have usually eaten since then. By "usually", I mean at least one time a year for five years or more.

| Q100. Do you usually eat (FOOD)?  |              | Q101. How often do you usually eat (FOOD)?                                     |
|-----------------------------------|--------------|--|
| A. Ground Beef                    | YES 1 →      | /_/_/_/<br># TIMES<br><br>PER DAY 1<br>PER WEEK 2<br>PER MONTH 3<br>PER YEAR 4 |
|                                   | NO 5 (Q100B) |  |
| B. Beef, such as steak or roasts? | YES 1 →      | /_/_/_/<br># TIMES<br><br>PER DAY 1<br>PER WEEK 2<br>PER MONTH 3<br>PER YEAR 4 |
|                                   | NO 5 (Q100C) |  |

|   |                                       |   |
|---|---------------------------------------|---|
| C. Pork or lamb?                          | YES    1       →<br>NO      5 (Q100D) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| D. Chicken?                               | YES    1       →<br>NO      5 (Q100E) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| E. Hot dogs, not including sausages?      | YES    1       →<br>NO      5 (Q100F) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| F. Cold cuts, including ham, lunch meats? | YES    1       →<br>NO      5 (Q100G) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| G. Bacon?                                 | YES    1       →<br>NO      5 (Q100H) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| H. Sausage?                               | YES    1       →<br>NO      5 (Q100I) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| I. Canned tuna?                           | YES    1       →<br>NO      5 (Q100J) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |

|   |                                      |   |
|---|--------------------------------------|---|
| J. Other fish?                          | YES    1       →<br>NO     5 (Q100K) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| K. Eggs?                                | YES    1       →<br>NO     5 (Q100L) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| L. Peanut butter and other nut butters? | YES    1       →<br>NO     5 (Q100M) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| M. Mayonnaise and Miracle Whip?         | YES    1       →<br>NO     5 (Q100N) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| N. Salad dressings?                     | YES    1       →<br>NO     5 (Q100O) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| O. Margarine?                           | YES    1       →<br>NO     5 (Q100P) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| P. Butter?                              | YES    1       →<br>NO     5 (Q100Q) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |

|  |                                      |   |
|--|--------------------------------------|---|
| Q. Sour cream?   | YES    1       →<br>NO     5 (Q100R) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| R. Fats in cooking?                                      | YES    1       →<br>NO     5 (Q100S) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| S. Olives  | YES    1       →<br>NO     5 (Q100T) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| T. Cheese, cheese spread, cream cheese?                  | YES    1       →<br>NO     5 (Q100U) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| U. Crackers?   | YES    1       →<br>NO     5 (Q100V) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| V. Chips, including potato chips, corn chips, tortillas? | YES    1       →<br>NO     5 (Q100W) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| W. Popcorn?  | YES    1       →<br>NO     5 (Q100X) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |



|                           |                                       |   |
|---------------------------|---------------------------------------|---|
| X. Ice cream, milkshakes? | YES    1       →<br>NO     5 (Q100Y)  | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| Y. Doughnuts?             | YES    1       →<br>NO     5 (Q100Z)  | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| Z. Cookies?               | YES    1       →<br>NO     5 (Q100AA) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| AA. Pastries?             | YES    1       →<br>NO     5 (Q100BB) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| BB. Cake?                 | YES    1       →<br>NO     5 (Q100CC) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| CC. Granola cereal?       | YES    1       →<br>NO     5 (Q100DD) | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| DD. Macaroni and cheese?  | YES    1       →<br>NO     5 (Q10EE)  | /_/_/_/<br># TIMES<br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |

|                                       |                                       |   |
|---------------------------------------|---------------------------------------|---|
| EE. Pizza?                            | YES    1       →<br>NO     5 (Q100FF) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| FF. French fries?                     | YES    1       →<br>NO     5 (Q100GG) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| GG. Cooked broccoli?                  | YES    1       →<br>NO     5 (Q10HH)  | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| HH. Raw broccoli?                     | YES    1       →<br>NO     5 (Q100II) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| II. Sauerkraut?                       | YES    1       →<br>NO     5 (Q100JJ) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| JJ. Cooked cabbage?                   | YES    1       →<br>NO     5 (Q10KK)  | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |
| KK. Raw cabbage, including cole slaw? | YES    1       →<br>NO     5 (Q100LL) | /_/_/_/<br># TIMES<br><br>PER DAY    1<br>PER WEEK   2<br>PER MONTH 3<br>PER YEAR   4 |

|  |   |   |
|--|---|---|
| LL. Pickled vegetables?                                      | <p>YES 1 →</p> <p>NO 5 (Q100MM)</p>                       | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |
| MM. Cooked cauliflower?                                      | <p>YES 1 →</p> <p>NO 5 (Q100NN)</p>                       | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |
| NN. Raw cauliflower?   | <p>YES 1 →</p> <p>NO 5 (Q100OO)</p>                       | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |
| OO. Cooked brussels sprouts?                                 | <p>YES 1 →</p> <p>NO 5 (Q100PP)</p>                       | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |
| PP. Cooked mustard greens, spinach, kale, or collard greens? | <p>YES 1 →</p> <p>NO 5 (Q100QQ)</p>                       | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |
| QQ. Avocado, including guacamole?                            | <p>YES 1 →</p> <p>NO 5 (Q100RR)</p>                       | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |
| RR. Raw water cress?   | <p>YES 1 →</p> <p>NO 5<br/>(INTRODUCTION<br/>TO Q102)</p> | <p>/ _ / _ /</p> <p># TIMES</p> <p>PER DAY 1</p> <p>PER WEEK 2</p> <p>PER MONTH 3</p> <p>PER YEAR 4</p> |



INTRODUCTION: Now I'm going to ask about places where you lived. Lets' start with your residence when you were 13 years old.

| Q102. What (was/is) your (next)/current) address (when you were 13)? |   | Q103. How old were you when you moved there? | Q104. How old were you when you moved away from there? | Q105. What were the sources of drinking water at this address? (Circle all that apply)  |
|--|---|--|--|---|
| 13 YRS   | <div> <div>STREET</div> <div>APT</div> </div> <div>COUNTY</div> <div>CITY, TOWN</div> <div>STATE</div> <div>ZIP/ZONE</div>    | / _ / _ /<br>AGE                             | / _ / _ /<br>AGE                                       | MUNICIPAL<br>PUBLIC WATER<br>SUPPLY 1<br>PRIVATE WELL 2<br>COMMUNITY<br>WELL 3<br>RAINWATER/CISTE<br>RN 4<br>RIVER/LAKE/POND<br>5<br>SPRING/BOTTLED<br>WATER 6<br>OTHER (SPECIFY)<br> |
| NEXT   | <div> <div>Street</div> <div>Apt. #</div> </div> <div>County</div> <div>City, Town</div> <div>State</div> <div>Zip/Zone</div> | / _ / _ /<br>AGE                             | / _ / _ /<br>AGE                                       | MUNICIPAL<br>PUBLIC WATER<br>SUPPLY 1<br>PRIVATE WELL 2<br>COMMUNITY<br>WELL 3<br>RAINWATER/CISTE<br>RN 4<br>RIVER/LAKE/POND<br>5<br>SPRING/BOTTLED<br>WATER 6<br>OTHER (SPECIFY)<br> |
| NEXT   | <div> <div>Street</div> <div>Apt. #</div> </div> <div>County</div> <div>City, Town</div> <div>State</div> <div>Zip/Zone</div> | / _ / _ /<br>AGE                             | / _ / _ /<br>AGE                                       | MUNICIPAL<br>PUBLIC WATER<br>SUPPLY 1<br>PRIVATE WELL 2<br>COMMUNITY<br>WELL 3<br>RAINWATER/CISTE<br>RN 4<br>RIVER/LAKE/POND<br>5<br>SPRING/BOTTLED<br>WATER 6<br>OTHER (SPECIFY)<br> |

|      |   |                  |                  |   |
|------|---|------------------|------------------|---|
| NEXT | <hr/> Street<br>Apt. # <hr/> County <hr/> City, Town      State<br>Zip/Zone | / _ / _ /<br>AGE | / _ / _ /<br>AGE | MUNICIPAL<br>PUBLIC WATER<br>SUPPLY      1<br>PRIVATE WELL      2<br>COMMUNITY<br>WELL      3<br>RAINWATER/CISTE<br>RN      4<br>RIVER/LAKE/POND<br>5<br>SPRING/BOTTLED<br>WATER      6<br>OTHER (SPECIFY)<br><hr/> |
| NEXT | <hr/> Street<br>Apt. # <hr/> County <hr/> City, Town      State<br>Zip/Zone | / _ / _ /<br>AGE | / _ / _ /<br>AGE | MUNICIPAL<br>PUBLIC WATER<br>SUPPLY      1<br>PRIVATE WELL      2<br>COMMUNITY<br>WELL      3<br>RAINWATER/CISTE<br>RN      4<br>RIVER/LAKE/POND<br>5<br>SPRING/BOTTLED<br>WATER      6<br>OTHER (SPECIFY)<br><hr/> |
| NEXT | <hr/> Street<br>Apt. # <hr/> County <hr/> City, Town      State<br>Zip/Zone | / _ / _ /<br>AGE | / _ / _ /<br>AGE | MUNICIPAL<br>PUBLIC WATER<br>SUPPLY      1<br>PRIVATE WELL      2<br>COMMUNITY<br>WELL      3<br>RAINWATER/CISTE<br>RN      4<br>RIVER/LAKE/POND<br>5<br>SPRING/BOTTLED<br>WATER      6<br>OTHER (SPECIFY)<br><hr/> |

|                |                  |              |              |                           |
|----------------|------------------|--------------|--------------|---------------------------|
| NEXT/<br>CURR. |                  | / / /<br>AGE | / / /<br>AGE | MUNICIPAL<br>PUBLIC WATER |
|                | Street           |              |              | SUPPLY 1                  |
|                | Apt. #           |              |              | PRIVATE WELL 2            |
|                | County           |              |              | COMMUNITY<br>WELL 3       |
|                | City, Town State |              |              | RAINWATER/CISTE<br>RN 4   |
|                | Zip/Zone         |              |              | RIVER/LAKE/POND<br>5      |
|                |                  |              |              | SPRING/BOTTLED<br>WATER 6 |
|                |                  |              |              | OTHER (SPECIFY)<br>_____  |

IF >7 ADDRESSES, USE CONTINUATION SHEET

Q106. Since you were 13-years-old, did you live anywhere that was within ½ mile of (a/an) (FACILITY)?  
(Note: ½ mile = 6 blocks)

A. Dump or landfill?

YES 1  
NO 5

B. Hazardous waste site?

YES 1  
NO 5

C. Airport?

YES 1  
NO 5

D. Farm?

YES 1  
NO 5

E. Nursery or greenhouse?

YES 1  
NO 5

F. Golf course?

YES 1  
NO 5

G. Railroad track that was used by trains?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

H. Gas station?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q106. Since you were 13-years-old, did you live anywhere that was within ½ mile of (a/an) (FACILITY)?  
(Note: ½ mile = 6 blocks)

I. Medical incinerator?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

J. Quarry?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

K. Factory or industrial plant?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q107. Since you were 13-years-old, have you or anyone else used pesticides or chemicals around your house, yard, garden, or animals for (PEST)?

A. Ants, carpenter ants, cockroaches?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

B. Bees or wasps?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

C. Flies or mosquitos?



|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

D. Moths, silverfish, or caterpillars?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

E. Mice, rats, gophers, or moles?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

Q107. Since you were 13-years-old, have you or anyone else used pesticides or chemicals around your house, yard, garden, or animals for (PEST)?

F. Fleas or ticks?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

G. Termites?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

H. Lice?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

I. Weed killers?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

J. Lawn insects?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

K. Tree insects?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

L. Garden insects?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |

M. Spiders?

|     |   |
|-----|---|
| YES | 1 |
| NO  | 5 |